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<u>.</u>		NT APP	LICAT	ON		First Name	d Inventor or Appli	cation Identifier	<u> </u>
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CLAIM	S (1) FO	)R	(2) NUMBER FILED (3) NUMBER EXTRA		(4) RATE	(5) CALCULATIONS
	TOTAL CLAIM (37 CFR 1.16(c))	//S	80-20 =	60	X \$ 18.00 =	\$ 1,080.00
	INDEPENDEN CLAIMS (37 CF		17-3 =	14	X \$ 78.00 =	\$ 1,092.00
	MULTIPLE DE	PENDEN	T CLAIMS (if applicable) (37 (	CFR 1.16(d))	\$260.00 =	\$
					BASIC FEE (37 CFR 1.16(a))	\$ 690.00
				Total of	above Calculations =	\$ 2,862.00
	Red	duction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	.27, 1.28).	
				-	TOTAL =	\$
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1.	A check	in the amo	ount of \$ to co	over the recordal fee is	enclosed.	
2.	The Commissione No. 06-1 <u>205:</u>	er is hereby	y authorized to credit ove	rpayments or charge the	e following fees to De	posit Account
	a. X	Fees requi	ired under 37 CFR 1.16.			
6	* <u> </u>	i ccs icqu	med dilder 37 Of IC 1.10.			
			ired under 37 CFR 1.17.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
NAME	PETER SAXON	<del> </del>	•			
SIGNATURE	PeleeSan			<del></del>		
DATE	March 3, 2000	-	4			

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